

SECTOR

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|--|---|------------------------|------------------|
| | | Application Number | 09/483,543 |
| | | Filing Date | January 14, 2000 |
| | | First Named Inventor | Tom W. Muir |
| | | Group Art Unit | 1646 |
| | | Examiner Name | Unassigned |
| Total Number of Pages in This Submission | 8 | Attorney Docket Number | 600-1-259 |

ENCLOSURES (check all that apply)

| | | |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Response | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> To Convert a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | <input type="checkbox"/> Postcard Check |
| <input type="checkbox"/> Information Disclosure Statement | <input checked="" type="checkbox"/> Small Entity Statement | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Request for Refund | |
| <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

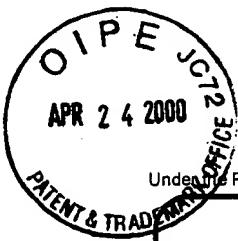
| | |
|-------------------------------|------------------|
| Firm or Individual name | Michael A. Yamin |
| Signature | |
| Date | April 18, 2000 |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

| | |
|-----------------------|------------------|
| Typed or printed name | Tracie Calderone |
| Signature | |
| Date | 04/18/00 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$)

836.00

Complete if Known

| | |
|----------------------|------------------|
| Application Number | 09/483,543 |
| Filing Date | January 14, 2000 |
| First Named Inventor | Tom W. Muir |
| Examiner Name | Unassigned |
| Group / Art Unit | 1646 |
| Attorney Docket No. | 600-1-259 |

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number
Deposit Account Name

11-1153

Klauber & Jackson

Charge Any Additional Fee Required Under 37 C.F.R. §§ 1.16 and 1.17 Charge the Issue Fee Set in 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid | | |
|----------------------------|----------------------------|-----------------|----------|------------------------|------|
| 101 | 790 | 201 | 395 | Utility filing fee | 345. |
| 106 | 330 | 206 | 165 | Design filing fee | |
| 107 | 540 | 207 | 270 | Plant filing fee | |
| 108 | 790 | 208 | 395 | Reissue filing fee | |
| 114 | 150 | 214 | 75 | Provisional filing fee | |
| SUBTOTAL (1) (\$) | | | | 345.00 | |

2. EXTRA CLAIM FEES

| Extra Claims | Fee from below | Fee Paid |
|--------------------------------|----------------|----------|
| Total Claims 50 -20** = 30 | X 9. | 270. |
| Independent Claims 7 - 3** = 4 | X 39. | 156. |
| Multiple Dependent | | |

**or number previously paid, if greater; For Reissues, see below

Large Entity Small Entity

| Fee Code (\$) | Fee Code (\$) | Fee Description | | |
|-------------------|---------------|-----------------|-----|--|
| 103 | 22 | 203 | 11 | Claims in excess of 20 |
| 102 | 82 | 202 | 41 | Independent claims in excess of 3 |
| 104 | 270 | 204 | 135 | Multiple dependent claim, if not paid |
| 109 | 82 | 209 | 41 | ** Reissue independent claims over original patent |
| 110 | 22 | 210 | 11 | ** Reissue claims in excess of 20 and over original patent |
| SUBTOTAL (2) (\$) | | | | 426.00 |

3. ADDITIONAL FEES

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid | | |
|----------------------------------|----------------------------|-----------------|----------|--|-------|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | 65.00 |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 400 | 216 | 200 | Extension for reply within second month | |
| 117 | 950 | 217 | 475 | Extension for reply within third month | |
| 118 | 1,510 | 218 | 755 | Extension for reply within fourth month | |
| 128 | 2,060 | 228 | 1,030 | Extension for reply within fifth month | |
| 119 | 310 | 219 | 155 | Notice of Appeal | |
| 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | |
| 121 | 270 | 221 | 135 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,320 | 241 | 660 | Petition to revive - unintentional | |
| 142 | 1,320 | 242 | 660 | Utility issue fee (or reissue) | |
| 143 | 450 | 243 | 225 | Design issue fee | |
| 144 | 670 | 244 | 335 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Petitions related to provisional applications | |
| 126 | 240 | 126 | 240 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 790 | 246 | 395 | Filing a submission after final rejection (37 CFR 1.129(a)) | |
| 149 | 790 | 249 | 395 | For each additional invention to be examined (37 CFR 1.129(b)) | |
| Other fee (specify) | | | | | |
| Other fee (specify) | | | | | |
| SUBTOTAL (3) (\$) | | | | 65.00 | |
| Reduced by Basic Filing Fee Paid | | | | | |

SUBMITTED BY

Typed or Printed Name Michael A. Yamin

Signature

Complete (if applicable)

Reg. Number 44,414

Deposit Account User ID 11-1153

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

44
453Patent
Attorney's Docket No. 600-1-259Applicant or Patentee: Tom W. Muir and Graham CottonApplication or Patent No.: 09/483,543Filed or Issued: January 14, 2000For: MULTIPLE SENSOR-CONTAINING ACTIVE MODIFIED POLYPEPTIDES, PREPARATION AND USES THEREOF**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 C.F.R. §§ 1.9(f) AND 1.27(d)) - NONPROFIT ORGANIZATION**

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION The Rockefeller UniversityADDRESS OF ORGANIZATION 1230 York AvenueNew York, New York 10021-6399

TYPE OF ORGANIZATION

- University or other institution of higher education
- Tax exempt under Internal Revenue Service Code (26 U.S.C. §§ 501(a) and 501(c)(3))
- Nonprofit scientific or educational under statute of state of The United States of America
(Name of state _____)
(Citation of statute _____)
- Would qualify as tax exempt under Internal Revenue Service Code (26 U.S.C. §§ 501(a) and 501(c)(3)) if located in The United States of America
- Would qualify as nonprofit scientific or educational under statute of The United States of America if located in The United States of America
(Name of state _____)
(Citation of statute _____)

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 C.F.R. § 1.9(e) for purposes of paying reduced fees under Sections 41(a) and 41(b) of Title 35, United States Code, with regard to the invention entitled MULTIPLE SENSOR-CONTAINING ACTIVE MODIFIED POLYPEPTIDES, PREPARATION AND USES THEREOF by inventor(s) Tom W. Muir and Graham Cotton described in

- the specification filed herewith
- Application No. 09/483,543, filed January 14, 2000
- Patent No. _____, issued _____

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above-identified invention.

If the rights held by the above-identified nonprofit organization are not exclusive, each individual, concern, or organization having rights to the invention is listed below,* and no rights to the invention are held by any person, other than the inventor, who would not qualify as an individual inventor under 37 C.F.R. § 1.9(c), or by any concern that would not qualify as either a small business concern under 37 C.F.R. § 1.9(d) or a nonprofit organization under 37 C.F.R. § 1.9(e).

*NOTE: Separate verified statements are required from each named person, concern, or organization having rights to the invention averring to their status as small entities. (37 C.F.R. § 1.27.)

FULL NAME _____

ADDRESS _____

individual small business concern nonprofit organization

FULL NAME _____

ADDRESS _____

individual small business concern nonprofit organization

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earlier of the issue fee and any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 C.F.R. § 1.28(b).)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING William H. Griesar

TITLE IN ORGANIZATION Vice President and General Counsel

ADDRESS OF PERSON SIGNING 1230 York Avenue

New York, New York 10021-6399

SIGNATURE  DATE 3/3/00



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

| APPLICATION NUMBER | FILING/RECEIPT DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NO./TITLE |
|--------------------|---------------------|-----------------------|---------------------------|
|--------------------|---------------------|-----------------------|---------------------------|

09/483,543 01/14/00 MUIR

600-1-259

02/22/0218

DAVID A JACKSON
KLAUBER & JACKSON
CONTINENTAL PLAZA
411 HACKENSACK AVE
HACKENSACK NJ 07601

1646

DATE MAILED:

02/18/00

NOTICE TO FILE MISSING PARTS OF APPLICATION

Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of \$65.00 for a small entity in compliance with 37 CFR 1.27, or \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a

small entity (statement filed) non-small entity is \$ 1025

1. The statutory basic filing fee is:

missing.

insufficient.

Applicant must submit \$ 1025 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).

2. The following additional claims fees are due:

\$ 540 for 30 total claims over 20.

\$ 468 for 4 independent claims over 3.

\$ for multiple dependent claim surcharge.

Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

3. The oath or declaration:

is missing or unsigned.

does not cover the newly submitted items.

An oath or declaration in compliance with 37 CFR 1.63, including residence, information and identifying the application by the above Application Number and Filing Date is required.

4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42, 1.43 or 1.47.

A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

5. The signature of the following joint-inventor(s) is missing from the oath or declaration:

An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s); identifying this application by the above Application Number and Filing Date, is required.

6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).

7. Your filing receipt was mailed in error because your check was returned without payment.

8. The application was filed in a language other than English.

Applicant must file a verified English translation of the application, the \$130.00 set forth in 37 CFR 1.17(k), unless previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).

9. OTHER:

Direct the reply and any questions about this notice to "Attention: Box Missing Parts."

A copy of this notice MUST be returned with the reply.

M. J. Benson

04/27/2000 NPIASAS0 00000012 09483543

Customer Service Center
Initial Patent Examination Division (703) 308-1202

01 FC:202 156.00 DP
02 FC:203 270.00 DP
03 FC:201 345.00 DP

U.S. GPO 1999 450-5875

FORM PTO-1533 (REV. 9/98)

65.00 DP

DA FC:205
PART 2 - COPY TO BE RETURNED WITH RESPONSE